DOCUMENT RESUME

ED 138 896 CG 011 370

AUTHOR Signori, E. I.; Kozak, J.
TITLE Study of Attitudes of the Elderly Toward Aging & the Aged.
PUB DATE Nov 76
NOTE 17p.; Paper presented at the Annual Conference of the Canadian Association on Gerontology (Vancouver, British Colombia, November 11-13, 1976) ; Not available in hard copy due to marginal legibility of original document

EDRS PRICE MF-$0.83 Plus Postage. HC Not Available from EDRS.
DESCRIPTORS Adult Development; *Age; *Attitudes; *Gerontology; Individual Characteristics; Morale; *Older Adults; *Personal Adjustment; Research Projects; *Senior Citizens; Social Psychology; Special Health Problems; Surveys

ABSTRACT

This study provides a closer perspective and appreciation of what elderly people think and feel about aging and the aged. Contained herein is a summary of the recorded written responses of 200 consecutive statements received from male and female persons 65 years old and over, in response to several broad questions regarding aging and the aged. The summary statements attempt to capture the diversity of meaning found in the recorded statements about a number of issues which are of interest to the elderly surveyed. In the issues discussed, no claim is made that the trends shown are generalizable to the total population of the elderly in British Colombia. However, that the issues may be of concern to a large number of the elderly is not contraindicated by these data. The additional, though as yet unanalyzed, data at hand from approximately 400 other respondents eventually should prove useful in confirming or disconfirming the consistency of present trends. Currently an attempt is being made to relate the experimental findings reported herein to findings obtained by studies using questionnaire and/or structured interview procedure. (Author)

****
* Documents acquired by ERIC include many informal unpublished *
* materials not available from other sources. ERIC makes every effort *
* to obtain the best copy available. Nevertheless, items of marginal *
* reproducibility are often encountered and this affects the quality *
* of the microfiche and hardcopy reproductions ERIC makes available *
* via the ERIC Document Reproduction Service (EDRS). EDRS is not *
* responsible for the quality of the original document. Reproductions *
* supplied by EDRS are the best that can be made from the original. *
****

ED138896

Study of attitudes of the elderly toward aging & the aged*

(a preliminary report)
by E.I. Signori & J. Kozak
University of British Columbia
Department of Psychology

Limitations of this report

The major purpose of this study was to provide a closer perspective and appreciation of what elderly people think and feel about aging and the aged. Contained herein is a summary of the recorded written responses of 200 consecutive statements received from male and female persons 65 years old and over, in response to several broad questions regarding aging and the aged. The summary statements attempt to capture the diversity of meaning found in the recorded statements about a number of issues which are of interest to the elderly surveyed. Although a comparison between an analysis of the 1st and the 2nd hundred cases indicated a high degree of similarity in the issues discussed, no claim is made that the trends shown are generalizable to the total population of the elderly in B.C. However, that the issues may be of concern to a large number of the elderly is not contraindicated by these data. The additional, though as yet unanalyzed, data at hand from approximately 400 other respondents eventually should prove useful in confirming or disconfirming the consistency of present trends. Moreover, a more detailed computer analysis, when possible, will attempt to relate and interpret trends according to: age groups, education, income, marital status, sex and occupational background.

Currently an attempt is being made also to relate the experiental findings reported herein to findings obtained by studies using questionnaire and/or structured interview procedures.

* Presented at the Annual Meeting of the Canadian Association on Gerontology held November 11 - 13, 1976, Hotel Vancouver, Vancouver, B.C.

CG011370

BEST COPY AVAILABLE

HARD COPY NOT AVAILABLE

U S DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

STUDY OF ATTITUDES OF THE ELDERLY TOWARDS AGING AND THE AGED

This project was funded by the provincial government through their Careers '76 Summer Programme which provided grants to UBC for the employment of students. During the previous two years of study and search the authors were able to conclude that there was a significant lack of information concerning the elderly's own views and opinions toward aging and the aged. Moreover, studies that have been attempted seem most often to have used formats involving predetermined questionnaires and/or structured interviews. It was felt that such approaches might be by-passing a great deal of the experienced views, feelings, attitudes and opinions of importance to the elderly themselves. Accordingly in this project it was decided to adopt and follow a somewhat different procedure - one that was sufficiently open-ended and that would permit the elderly person to express his own views on any matter which he felt might be important for understanding how the elderly person perceived and conceptualized the fact of aging and the aged. Accordingly, the elderly person's participation was guided by only a very few general questions, viz:

> What are your impressions about elderly people?
> how do you feel about being old?
> How do you think the elderly person is viewed in our society?
> What else might be done to improve life for the elderly?
> Any other comments?

The important feature of these questions is that they direct one to focus on one's own impressions, experiences, feelings and attitudes about the fact of her/his aging. In this way it is felt that the respondent is more likely to report on what s(he) feels is important in aging rather than supplying answers to more specific questions which others (usually much younger people) have deemed to constitute the essential ingredients for an understanding of aging.

In the present study one important consideration has been the provision made for reporting on uniqueness of experience, feelings and attitudes and not on the commonality of experience dictated by the answers to a standard set of specific questions - many of which may be of little or no interest or importance to a respondent. If common or general trends appear in the present study it will be as a result of the common experiences identified in highly individual reports and these will have surfaced without sacrificing the highly unique additional data which appear in the individual reports. To the present authors this feature would seem to add to the validity and value of the individual reports over data collected by a standard questionnaire, moreover it may be contended that a respondent is apt to present a more precise report when he is directly reporting on his own experience and feelings than when he is asked to report to a set pattern of questions among which are many with which he is often unable to relate, or because they represent the dictates of enforced authority may provoke response distortions that have little to do with the content of the experience, attitudes or feelings about aging.

Other data sought from respondents were biographical in nature and

include: age - by 5-year intervals from age 60 to 80+; sex: education completed-by gross categories: none, grade school, high school, college, vocational; marital status; financial resources: superior, sufficient, inadequate; North American citizenship: 1st, 2nd, 3rd generation or more, other; and former occupation by broad categories: e.g., agricultural, business, professional, home maker, secretarial etc., and other.

This information was solicited in order to provide, if the need should arise, some basis for estimating and evaluating the comparability of the various samples (e.g. the 1st 100 consecutive reports and the 2nd, and 3rd 100 consecutive reports and/or reports from special groups of elderly or younger control groups) in regard to the major trends being reflected in their statements. It was felt that the best interest of the project would be served if one could avoid requesting overly personal information on any biographical fact but especially in areas concerned with financial matters.

In the initial stages of the study the reports were obtained by interview and the responses were recorded by the interviewer. This method was soon reserved for individuals who might not otherwise wish to participate. Most of the data were obtained as written statements by participants.

A copy of the sheet given to each respondent containing the above information is shown as Appendix I.

Analysis of Data:

The statements given by the elderly in response to each broad question were analyzed in detail for the specific meaning(s) they contained. Here the critical problem is to establish what issues the respondent is raising. Cross-checking by two judges and agreement by them on questionable issues was achieved before the issue was listed. Only the new issues which appeared in subsequent statements were added to the list. Recurring issues were recorded as frequencies by report number opposite the appropriate issue to provide a basis for counting total frequencies. From this point on the analysis involved drawing together those issues which seems to relate, meaningfully to similar categories, e.g., issues pertaining to health, housing, transportation, mental ability, social adjustment, personality, human relations, maturity, etc. At all times the designation of the categories was determined by the nature and frequency of the issues mentioned in the individual reports rather than from a predetermined list of categories. This procedure also allows for the formation of progressively broader categories that may be dictated by the data itself.

The data for the 1st 200 cases are summarized for each question separately. In each instance, general trends are noted indicating the (N) number of mentions by which it is supported. The numbers that follow in brackets, e.g., (8), unaccompanied by the letter (N), give an indication of the type of suggestion that features most strongly in the total (N) that supports the particular generalization. Other specifically mentioned items not accompanied by numbers appeared infrequently or several times and are indicated in order to amplify the meaning of the generalization.

Q.1. What are your impressions about elderly people?

From the tabular listings shown below it is seen that the elderly attribute both favorable and unfavorable personal qualities to other elderly in a ratio of approximately 2:1. Although the data shown represent the findings for 200 cases, a similar ratio of favorable to unfavorable qualities was obtained for both the 1st and the 2nd 100 consecutive cases separately. However, despite the similarities in trend shown between the 1st and 2nd hundred consecutive cases some differences occur in the variety of the descriptive details that appears among the 1st and 2nd hundred cases. The overall extended listing for 200 cases only, is given in the listings.

Favorable or positive qualities	f
Kind (17), nice (10), appreciative (2), gentle, pleasant- (when healthy, or financially secure or even despite misery)	34
Good (17), wonderful (2), great, terrific, fine, lovely- if healthy	25
Contented (12) - if married, e.g., common law, happy (2), cheerful (4), good sports (4), have fun (2), optimistic	30
Friendly (13), helpful (8), sociable (6), agreeable, human - when healthy and financially secure	29
Are active	17
Tolerant (7), understanding (4), thoughtful, considerate, courteous, especially if healthy or in older men	15
Adjusted and mature (7), sensible (3), stable, sane, reliable, same over the years	15
Enjoy life (3), want to enjoy life (2), zest for life (3), try to live a full life (2), try to enjoy their golden years	11
Interesting (8) - as conversationalists	8
Well groomed (4), pride in appearance	5
Have dignitity and self-respect	2
Fine quality of spirit	1
Do their best	1
Like a quiet life	1
Capable of great humour	1
Some maintain a youthful or spiritual outlook	1
	N=196

Unfavorable or negative qualities	f
Lonely (23) - if single or widowed female (1)	23
Withdrawn (7)	7
Individualistic (8)	8
Self-centred (5) talk about themselves too much, self-pitying (4)	10
Greedy, grasping, take too much for granted, unappreciative (2), expect too much from Govt and social workers	5
Grouchy (4), crochety, disgruntled, miserable & cranky, stubborn, push and obnoxious, difficult (2)	11

Unhappy (3), sad (2) - with ailments, depressed, pouting	7
Complain too much (3) but not willing to help themselves, grumbles, if sick or poor, critical - of the young, fussy	7
Bad, not nice, not so good (2), disappointing	5
Inactive (3), passive, lazy, indifferent	6
Are dependent on others, need help (2)	3
Some have idiosyncratic habits, mumble, leave fly open, mismatch clothes	1
Some overindulge in drinking, smoking, eating	1
Very few are screwy	1
	N =95

Because of a lack of appropriate comparative data it is not possible to judge whether the elderly are any more charitable or severe in judging their peers than younger people may be of theirs.

The elderly are described both favorably and unfavorably (N=34) with regard to mental competence in a ratio of about 1:1. Some are capable and can handle their own affairs, are intelligent (4), some are bright at 90, have more wisdom, knowledge, experience, understanding, open-mindedness and common sense. They are more resourceful and manage well when healthy. As such they are seen as important to society, aware of social changes, and have a lot to contribute to others, but because society wrongly sets them aside, they represent a lot of wasted talent. In negative terms some are described as confused (5), or show mental impairment or age mentally, lose their ability to remain lucid, and at their worst are senile and function as 'vegetables'. In other respects some are described as ignorant, illiterate, set in their ways - (which is a handicap), tied to the past or conservative. As in many of these comparisons it would be of interest to know how well younger people evaluate their peers in regard to mental competence.

Of the reports about Physical Health (N=33) a few are positive and include: the elderly are neat and clean, and take excessive care of themselves. When they are in good health they are likely to be outgoing, full of life and active, activity assures longevity and contentment and thus are able to help other elderly people. The remainder emphasize that the elderly may have either mental or physical problems and impairments and handicaps, e.g. hearing loss, which reduce their physical activity; they may also experience anxiety about illness, or endure suffering, which results in moans and groans. More generally they are described as being in poor or failing health, or experience waning health, which may make them physically slower. Illness or poor health also makes it harder to change and adopt a new life style. Moreover, the elderly themselves contribute to their plight through a lack of personal care or by avoiding or not getting the exercise they need. Men more than women are also seen as unable to care for themselves and are 'dirty' a lot of the time.

The elderly take an interest in economic and financial matters (N=29). They claim they have less money than the rest of society, and are much concerned about inflation (6) and generally see themselves as poverty stricken (6). Lack of sufficient money is seen as reducing their sphere of life. Some have prepared for old age and manage well on what they have, or are comfortable because they are well-off. Some are careful spenders and for others the anxiety experience of the depression of the 30's is seen as fostering tolerance and understanding, and denial of luxuries in order to save for their old age. Others claim that their sufficient pension has improved their state of happiness, or that they appreciate the financial assistance and care given to them, or that they can have too much financial independence for their own good. Moreover, their inexperience with money matters may lead to confusion and frustration later in life (especially for surviving widows).

In regard to interests, the elderly are also evaluated both favorably and unfavorably (N=28).

Favorably they are seen as very occupied, keen on many subjects, interested in most things, active in community affairs and eager to become involved. Most seem to be aware of events (are with it), are busy in one way or another, active in different categories of sport, in games at centres or in recreation and as having time for travelling, holiday and entertainment. They also try to keep up with daily living and are concerned with problems of the world as well as with more local social problems including the problems of youth. Among the negatively toned attitudes the elderly are seen as not taking advantage of senior citizens activities and not being sufficiently interested in everything, or losing an interest in their surroundings. Some don't care and make no effort to stay in the main stream of life. In other respects some are shut off from the learning arts and on what is going on in politics. They are also seen as worshipping youth and money too much and thereby losing out on fun. However, churches have become a part of their lives and the suggestion is made that more of them should have a hobby.

In comparative terms the elderly are described (N=17) as no different from other people (8) or that they are all different, or can be tolerated. Their life is better than before. Within the elderly some are good, other bad, some are active and others are not; some are old at 70; others are out to enjoy life, some are tolerant of young people, others are not. They are also considered lucky (in relation to others).

Comments are made about the conduct of the elderly (N=12). Some complain that the elderly use the label 'old age pensioner' to obtain concessions, or for seeking special privileges. Also some of them drink too much, or show a lack of spiritual strength. Moreover, old married women are catty and the Victorian background of females restrains their involvement. They seem to accept (uncritically) what the government provides because their poverty denies them an opportunity to organize. In more favorable terms they may be categorized more as fighters than as

passive participants in society and are described as courageous in keeping contact with the old and the new. Also they are seen as having strong moral principles, or as experiencing anxiety about the moral attitudes of the younger generation.

In regard to life style (N=11) the elderly have more freedom than before and like their independence (4) - preferring to stay at home, with some being especially satisfied with their own home. They are also viewed as an asocial people who opt out of community life, and are deprived of their former companionship. Some accept their lot, try to make the best of things and/or have a good outlook on life.

Others describe the kinds of adjustments some people make to the aging process (N=9). Some are resigned to their situation (of being old) and are aware that time is running out. Others are coy about it, or treat it as though it isn't true; or bring the fact of aging to the attention of others for subtle reasons. Moreover, the eventual disappearance of one's old friends through death causes anxiety about the future, and some even wait for death. There are others who feel activity in life should cease for the aged and others who experience depression and difficult times with retirement.

In the area of social and human relations (N=6) the elderly prefer to be with people of their own age, but some like the young, and want to be loved by family and friends. They need loving care and understanding and should be appreciated more as pioneers. Finally, the elderly are sociable, enjoy company and friends, are good social mixers, and are lovely to work with.

Some of the elderly expressed views about the developmental aspects of aging (N=3). Thus, the elderly are basically the same over the years, or mellow with age or become progressively over-demanding.

3 subjects did not really know and 12 gave no responses.

Q.2. How do you feel about being old?

The most frequently expressed view to this question is that getting old is an inevitable, natural process, about which nothing can be done and therefore one should take it as it comes and make the best of it (N=69). Moreover, many never feel old or show little concern or are indifferent about getting old (N=42) expressed variously e.g., "haven't decided what old is","never think of it", or "feels no different'. When positively or favorably experience (N=41) respondents describe their feelings as good, enjoyable, great, fine, etc., with infrequent qualifiers such as "if in good health", or "within one's physical limitations", or "when accompanied with friendship or respect", or "as an interesting period of fulfillment". When negatively or unfavorably reacted to (N=44) getting old is described as something to be disliked, hated, dreaded, as saddening or depressing and as a terribly lonely period with infrequent qualifiers such as: "because of physical limitations, illness", or "wishing to be younger".

State of physical health is also identified as an important factor that determines how one might feel about getting old (N=26). Good health is a prerequisite for enjoying old age but more frequently there is expressed a concern about illness, physical disabilities, waning strength, loss of energy, feelings of tiredness, difficulty in moving about, and the cruelty that may accompany certain of these conditions.

On the matter of social and human relations the elderly respondents recognize (N=19) that social life and good family relations may contribute to producing positive feelings about aging. Some feel fortunate because their family is near, or that they have a family in the 4th generation. Some are pleasant to others, mind their own business or avoid being over-demanding to improve their relations with others. Some are happy when their spouse is not in a nursing home or are happy to help others and do volunteer work, if they are in good health themselves. However, if one is plagued by pain one may be troublesome to others and one respondent felt she was a nuisance to younger people. One male respondent lamented the lack of cooperation by younger females which he felt might force him into homosexuality. Others express a desire to be apart from others, or to stay out of senior care and are sensitive to feelings of resentment by their children who felt they could be elsewhere.

One's independence, freedom from commitment and responsibility and to do one's own thing, express one's own ideas, and to travel and holiday when one wants to are seen as comforts as well as factors which add happiness to and reduce the process of aging (N=10).

Some of the elderly place the responsibility on the person himself for enjoyment in old age (N=10). One should have things to do, keep healthily and enjoyably active, try to live one day at a time and keep interested in one's daily activities, try to be young, be pleased to help others and engage in voluntary activities.

Some respondents (N=5) comment about the mental competence of those getting old. Some elderly are seen as able and efficient as ever, especially if they are also in good health. Some feel more assured, or well adjusted, or independent and may have too many interests to accommodate while others feel they are no longer useful but try to maintain a sense of humour and engage in narrow interests such as reading newspapers, etc. However, social involvement and interaction keeps one alert and advice is given to keep busy and keep learning to maintain mental competence.

Feelings and enjoyment in old age are also seen as dependent upon one's financial circumstances or upon financial assistance from the government or on whether one can manage. (N=4).

In comparative terms (N=2) a few reported they feel they had a better childhood than today's youngsters, or are proud of the generations that follow.

Feelings about dying are not wholly negative or saddening experiences (N=6). Variously expressed is a wish to die, or looking forward to the hereafter.

Resentment was also expressed about having to retire because of a calendar date.

Religious pursuits are seen as offering mental well-being in old age.

Aging is also viewed as another phase of life.

Finally, old age is worse for a man.

1 indicated "no comment" and 4 gave no response.

Q.3. How do you think the elderly person is viewed in our society?

Significantly, the elderly believed that society views them in a more negative than positive fashion. The types of negative attitudes expressed (N=143) can be summarized in a response given by a respondent, viz, the elderly are seen "as expendable supercargo in which the attitude aggravates as government costs rise." The elderly feel that society sees them as a burden (8), as an obstacle to the ambitions of youth, as a nuisance (15), as being unwanted (9) by own children, as unnecessary (4), as parasites, and as an evil influence. They also feel that the elderly are categorized as over-the-hill, as one whose life is over, as a has been, as a non-productive person, as a liability, as something to be rid of, set aside or hidden, and as something removed from the mainstream of life, as squares, as old fashioned or as tied to the past forcing old views on the young.

Furthermore, the elderly feel they are not normally respected or that the young do not respect the elderly (30), and are not truly accepted, nor honoured, nor tolerated, or merely tolerated, are treated harshly, with contempt, as underdogs, as 2nd or 3rd class citizens, and that others will not help them. They felt they were seen as being unappreciative, unsociable, disliked, viewed negatively, disparagingly, rudely, carelessly and frowned upon, or they are viewed as unworthy of praise, taken for granted or ignored or as unworthy pensioners and are considered stingy. They are made the butt of awkward remarks by the young, are coddled because they won't live long and are viewed as ones who present the problems of dying to society. They are also viewed as pitful objects for whom one feels sorry, or as dirty, or merely forgotten, as having large concerns and as ones who receive publicity for their failures, and, perhaps are missed only after death.

Of the positive and favorable evaluations made (N=89) the elderly feel that they are respected by all (17) only if earned, or if they respect others, and especially in Jewish and oriental cultures. They are venerated and honoured, appreciated, loved, admired, esteemed,

tole·.ced, accepted or treated with charity (10), and that others express their favorable attitudes generally as. alright, good, well, or favorably (10). The elderly are shown kindness and seen in a good light by the family, the family is nice to them, most people are kind to them, and grandchildren are kinder. Also they are treated considerately, kindly, fairly, viewed as assets, or patronized by the young, and are considered useful at times. Moreover, society is seen as being fond of them, giving them concessions and mostly as liking to help them.

In more comparative terms (N=40) some elderly claim: they are treated better than before (4), are better off than before or that it is better than it was (7), but are not treated as well as they should be. Some treat them kindly, others do not; they are treated fairly well by some people, some view them as good, others as bad, or that there is room for improvement. More negatively the elderly feel there is less respect than before, one respondent felt that young people were seen as inconsiderate and old people as nice. Moreover, the elderly are viewed differently by different people, or it depends on the person you come into contact with and will vary according to the person and will be highly individual.

A more neutral, general attitude is expressed when the elderly claim they are treated no differently from others, are viewed as receiving no preferences, and that it is no different from past generations or have no complaints. One respondent stated that a lot depends on how a person thinks of himself.

With regard to health (N=3) the elderly are viewed as ones who present the problems of dying to society, are slow in speech and action, and, more positively, are admired for their good health.

In the area of social and human relations (N=19), being viewed as elderly is the first social error. Some elderly blame the negative social attitudes towards them as resulting from their being labelled as 'old age pensioners' or as 'senior citizens' or of their being too much in the news or in the limelight, or on there being too much talk about being older, although it is kindly meant. Moreover, they are misunderstood by modern young people and, conversely, equally misunderstand them. They are viewed as envious of the younger generation, but as a minority lack power and are therefore unrecognized. Though they are in need of encouragement, society neither thinks about nor helps the elderly. The elderly also claim that they do not worry too many people, that personal help is avoided and everybody is too busy to deal with them, and that the government gives only lip service to their needs. Finally, they are seen as lonely without the family.

In negative financial or economic terms (N=15) the elderly are seen as ones who are exploited in business or are neglected in relation to the fixed incomes they live on, or are seen as having fixed financial security. They see themselves as having incomes below the poverty line and are discriminated against in stores and cafes because they don't

spend too much, and as living in miserable rooming houses. They are viewed as a burden on the state when poor, and with jealousy by some people in regard to financial help being received and as benefiting from reduced rates on many of the activities available for the elderly. Moreover, they are viewed favorably if rich, are frowned upon if on pension, older children cannot afford to look after them, and are seen as spending money on bingo or as having no money.

The elderly are viewed both positively and negatively (N=14) in regard to their mental competence, Some of the young trust their judgment and experience, appreciate their reading competence and knowledge, and some elderly feel they are insufficiently used by the professions. The elderly are able to live by themselves, and are valuable when interesting and making contributions. They are also described as mentally incompetent, and as incapable of doing anything useful for others, or for themselves.

Some elderly believe that the status and importance of the aged in society has been depreciated (N=12): society has reduced the previous status of the aged in that they enjoy no special privileges and that age is no longer accepted for its wisdom. They feel that the elderly should be viewed as a font of wisdom rather than as a burden. Society views them as losing in character and skills or that the elderly should be viewed as mentally retarded to be entertained or cuddled as children, or that old age is a time for reminiscing. Some elderly feel that they command less respect than before, and are denied responsibility although they may be acquiring some as well as getting a special place in society.

Some elderly point out that modern life styles (N=5) in which small families, working mothers and selfish interests are magnified leads to placing the elderly in rest or nursing homes, and cities and municipalities are forced to take an interest in their needs and make concessions. Moreover, there is no place in the family for them and the present small home trend does not allow them to remain with the family. These trends also seem to reflect or support the statement in one report that society takes less interest in parents today.

Finally, 4 didn't know what to say or couldn't answer, and 9 gave no answer.

Q.4. What else might be done to improve life for the elderly?

Help the elderly to become involved in a variety of activities received marked mention in the improvements suggested by the elderly (N=57). The suggestions made include: a need for more and better places for recreation, more accessible centers - with cultural and hobby activities during daylight hours; more social entertainment, social contacts and gatherings and social activities for men. The elderly are also exhorted to join clubs, golden-age groups and to participate in projects, community affairs, in politics, in physical activities and

outdoor recreations. They should maintain their interests, especially in reading. Moreover, information centers and other centers should not be discontinued, especially as one gets used to them. People should not be taken out of their communities (for activities) even though some do not participate sufficiently in the available benefits. There is too much emphasis on games rather than on other forms of recreation.

In regard to social and human relations (N=55) the elderly suggest a need for more sympathy, compassion, respect, kindness, patience and understanding, less interference in homes by social workers, more contact from people and relatives and others who love and know about books, rather than from government personnel; more social life (7) and social organization. Some suggestions were made to maintain communication at all age levels but also to place people of the same age in homes and avoid housing the elderly with mental retardates and to avoid using labels to describe the elderly. A news letter about counselling service should be sent to pensioners. The lonely need help and those who live alone need help with shopping, banking, etc. The elderly should be made to feel needed but they are exhorted to show more spirit and prove their stature and importance to the life that surrounds them. Both a Federal and Provincial Minister for Seniors would be of benefit to their cause.

The elderly make a variety of proposals (N=54) to reduce their financial concern and improve their financial status. Some suggest better controls over the negative effects of inflation on their savings. Others complain of the inadequate support they receive and the loss of dignity which often accompanies this status. Various specifics are suggested to deal with the problem: by removing all forms of taxation, by tax remissions, by reducing income taxes, allowing a higher income allowance, removing school taxes, raising pensions and by being given total freedom to spend their earnings, or a guaranteed adequate income, especially to widows who had no opportunity to join a pension plan or a decent pension, by making retirement contingent on one's financial security, by being granted discounts from business people, by encouraging more taxable savings for old age and help reduce current inflation, by reducing or controlling the cost of living (7), by increasing rental subsidies or correlating rents with income (9) and low rental apartments to those on pension. The financial status of the elderly might also be improved if they had total socialized care including housework, gardening and transportation, and treatment for health problems would allow them to avoid the high costs of hospitalization and going broke. Costs might be reduced if financial assistance were given only to the elderly poor and not to other young or old healthy people. Other suggestions include providing other free services and privileges to the aged and more freedom to spend more for the elderly.

A significant proportion of the elderly are satisfied (N=40) with what opportunities are available, with the centers and with life. Nothing, or not much more, should be given especially since some of the elderly are unwilling to give anything, or are unwilling to budge from

their rooms. The elderly are very fortunate and are well looked after by our government and things are much better than before. Some do not know what improvement is needed. A few feel that the improvement needed should be supplied by government.

In regard to physical health needs, the elderly make both general and specific suggestions (N=39). There are general requests for improved health and treatment services preferably to be operated by government, social agencies or churches, rather than by private operators. The treatment and services given should cover dental, eye care and pharmacare and other medical problems in order to avoid hospitalization and lessen suffering. Besides, more hospitals and nursing-care homes with means, and extended and immediate care homes are also included as needs. All nursing-care homes should be inspected and supervised by government. A need for improved diet, the upgrading of food and nutritional care in existing private and government sponsored rest homes is also identified by the elderly.

Reasonable and worthwhile suggestions (N=20) regarding housing are also included in the reports of the elderly. There is a need for more and better housing with a private bed-room rather than a hide-a-bed which is more suitable for those in failing health and for women. Government controlled low-cost housing including safe mobile courts as well as adequate rental accommodation consisting of a quiet one-bedroom suite near shopping centers and transportation would contribute to the feeling of independence, the elderly seem to desire.

Some of the elderly suggest various measures could be taken to preserve one's independence and continuity in the life they have known (N=26). The elderly should be encouraged to learn to help themselves and retain privacy and independence (9), to live in their own homes and given assistance with housework, gardening and other home needs and/or preserve the qualities of home life by being allowed to live with the family when possible, or bring personal articles with them (when moved to nursing care residences) (9). This objective also would be better realized by building smaller retirement homes rather than big high-rises and by the de-institutionalization of places.

In regard to training and education suggestions (N=17) are made to train the young on how to deal with all phases of life concerning the elderly, that the experience of the elderly could be of benefit to them; that the young should be disciplined more, taught righteousness by the church, and taught to attend and to respect the elderly more (7). The elderly on the other hand should be taught crafts - if able, as well as about different life styles, about growing old and about nutrition, to acquire hobbies during their life time and currently to be helped to realize their full potential; more choice of courses is suggested in the Summer Session at UBC.

In regard to the mental competence of the elderly some reports (N=8) complain that the elderly are put down on intelligence and are treated as morons. Such practices should not be continued as the elderly

are knowledgeable and experienced and should be treated as people and not shelved. They should be encouraged to read and some already know about the opportunities available to them (to improve their schooling).

Some suggestions relate to improving transportation and movement facilities for both the non-invalid and invalid population (N=6). Thus some feel a need for improved transportation to attend social activities, lectures and plays. Moreover, it is felt that a person should be delegated in each home to take people to places. There should also be improved elevator service for the handicapped.

In regard to retirement (N=3) some of the elderly feel the government owes them a living and that retirement should not be governed by age and therefore should be removed. More directly, one respondent would like to have a job.

The meagre references to sexual activity (N=2) indicated regret over the infrequency of sexual participation during one's earlier years and the inability of one respondent to provide sexual satisfaction to a friend who was currently hospitalized in a mental institution.

More general suggestions for improving the life of the elderly include (N=22):

(1) The elderly should be assisted to live in comfort, happiness and contentment, in a better environment.
(2) Treat them as individuals in relation to their needs and illnesses.
(3) Attention given to them should be no less than that given to others.
(4) Life planned for them should be meaningful.
(5) They should contribute to their life improvement as well as add pleasure to the life of others as well as for the sake of the centre.
(6) 'Aging' should not be treated as a disease by government.
(7) Handouts should be stopped in order to prevent the lying and stealing which are sometimes by-products of such practices.
(8) Continued study of the problem of the aged is also proposed.

Appendix I

NOTE: Your answers are anonymous and will remain confidential

This is a collection of attitudes toward the older person and of aging by older persons themselves.

Your participation may have an important bearing on social attitudes and will be used solely to estimate general trends.

---

1. What are your impressions about elderly people that you know?

2. What are your impression about elderly people in general?

3. How do you feel about being old?

4. How do you think the elderly person is viewed in our society?

5. What else might be done to improve life for the elderly?

6. Any other comments?

Please check ( ) below on the appropriate line.

AGE:
- 60-64 ____
- 65-69 ____
- 70-74 ____
- 75-79 ____
- 80+ ____

EDUCATION:
- None
- Grade School ____
- High School ____
- College ____
- Vocational ____

SEX:
- Male ____
- Female ____

MARITAL STATUS
- Single ____
- Married ____
- Widow(er) ____
- Separated/ divorced ____

FINANCIAL RESOURCES
- Superior ____
- Sufficient ____
- Insufficient ____

NORTH AMERICAN CITIZENSHIP
- 1st generation ____
- 2nd generation ____
- 3rd generation or more ____
- Other ____

FORMER OCCUPATION
- Agricultural ____
- Tradesman ____
- Business ____
- Managerial ____
- Professional ____
- Home maker ____
- Secretarial ____
- Administrative ____
- Other ____